GEAR UP IowaTEACHER/COUNSELOR/STAFF In-Kind Activities

lowa College Student Aid Commission 200 10th Street 4th Floor Des Moines, IA 50309-3609 515-725-3406 FAX: 515-725-3401

The US Department of Education requires a dollar-for-dollar match of either cash or in-kind contribution of federal dollars disbursed. In-kind contributions indicate grantee commitment to the GEAR UP goals of academic support, counseling and advising, and career and college exploration. In-kind documentation delineates time spent beyond the professional day for which the certified or classified education professional is not paid.

	School	Name	Position Title	Month	
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V	Activity Dranging and/or preparing workshape or prefereignal development activities regarding condemic preparation, correct and college access at why and critical				Hours
<u> </u>	Preparing and/or presenting workshops or professional development activities regarding academic preparation, career and college access, study and critical thinking skills, and the importance of academic rigor for all student populations.				
<u> </u>	Analysis of student data.				
	Web based research to improve of	classroom curriculum/enhance instruction.			
	Preparing homework or class wor	rk assignments.			
	Tutoring, mentoring, or student interventions designed to assure academic success.				
	Activities that provide alternatives	s to negative peer pressure.			
	Communicating with students/parents by email or telephone.				
 	Participating in professional development activities which support GEAR UP goals.				
	Career fairs, college fairs, and/or campus tours: planning, participating in, or overseeing				
	Counseling interventions specifically related to GEAR UP goals: Planning/providing				
	Identify barriers such as gender, sexual orientation, race, color, national origin, disability, or age that impede access to participation in academically rigorous classes or extra curricular activities.				
	Community service projects that involve GEAR UP cohort members.				
	Other; please describe.				
				Total Hours:	
I certify that I have volunteered hours toward GEAR UP that is time spent outside of the classroom and beyond the contract day—I <u>cannot</u> count hours being paid by GEARUP funds.					
Sig	ignature Teacher/Counselor/Staff	Date			
Si	ignature Principal/Superintendent	Date			
To	To be completed by Gear Up Office				
_	hours @ per hour were entered into the GEAR UP matching funds data base on by , GEAR				Representative